

APPLICATION FOR SEARCH OF MARRIAGE RECORD FILES

Grooms Name: _____
First Middle Last

Brides Name: _____
First Middle Last

Date of Marriage: _____
Month Day Year

Place of Marriage: _____
Church or Place City

APPLICATION MADE BY:

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

MAIL COPY TO:

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Your Relationship
To Person: _____

Intended use
Of Certification: _____

Number of Copies Desired: _____

Amount Enclosed: _____